

**REGISTRAR OF CONTRACTORS
3838 N. CENTRAL AVE., STE. 400
PHOENIX, AZ 85012-1496**

NAME CHANGE REQUEST FOR CERTIFICATE OF DEPOSITS

Date: _____

Registrar's Preliminary Receipt No.: _____

License number ROC: _____ Classification: _____ Amount of CD \$ _____

Bank: _____

Address: _____

City: _____ State: _____ Zip code: _____

Savings & Loan: _____

Address: _____

City: _____ State: _____ Zip code: _____

I/we hereby submit a request for a change of name on the above referenced license and alternate cash deposit document for your approval.

FROM: _____

TO: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

E-MAIL ADDRESS: _____

EFFECTIVE DATE: _____

Signed: _____
Individual Owner, Partner, Member or Corporate Officer

APPROVAL OF REGISTRAR OF CONTRACTORS:

The above name change is hereby approved.

By: _____
CHIEF OF LICENSING

RECEIVED BY ACCOUNTING DEPT.:

The above name change is hereby received and recorded.

By: _____
ASSISTANT DIRECTOR, ADMINISTRATION